

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

Armstrong Energy Corporation

Address

P.O. Box 1973 Roswell, NM 88201

Reason(s) for filing (Check proper box)

- New Well
 Recompletion
 Change in Ownership

Change in Transporter of:

- Oil Dry Gas
 Casinghead Gas Condensate

Other (Please explain)

Name Change effective 5/1/87

If change of ownership give name and address of previous owner

Chevron U.S.A. Inc., P.O. Box 670, Hobbs, NM 88240

I. DESCRIPTION OF WELL AND LEASE

| Lease Name | Well No. | Pool Name, including Formation | Kind of Lease State, Federal or Fee | State | Lease No. |
|-----------------------|----------|--------------------------------|--|-------|-----------|
| West Pearl Queen Unit | 108 | Pearl (Queen) | State | State | E-8182 |

Location

Unit Letter F; 1980 Feet From The North Line and 1980 Feet From The West

Line of Section 28 Township 19S Range 35E, NMPM, Lea County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Shell Pipeline Corporation | P.O. Box 1910, Midland, Texas 79702 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |

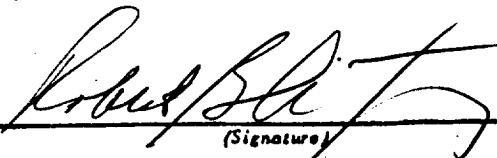
| | | | | | | |
|--|------|------|------|------|----------------------------|------|
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| | B | 32 | 19 | 35 | | |

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

I. CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.



(Signature)

President

(Title)

May 1, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 11 1987, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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